



6540 South Glacier Street Suite# 120 Seattle, WA 98188 Phone 425.656.8210 Fax 425.656.4400

Company Name \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 P.O. \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Contact Person \_\_\_\_\_ Title \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_  
 Business Location (check one) Own \_\_\_\_\_ Lease \_\_\_\_\_ Rent \_\_\_\_\_  
 Years in Business \_\_\_\_\_ Resale Certificate# \_\_\_\_\_ Is Purchase Order Required? \_\_\_\_\_

#### BUSINESS STRUCTURE

Complete ONLY ONE section as it applies to the ACCOUNT NAME above

#### SOLE OWNERSHIP

Name \_\_\_\_\_ Birthdate \_\_\_\_\_ SS# \_\_\_\_\_ Spouse's Name \_\_\_\_\_  
 Residence Address \_\_\_\_\_ Phone (\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_  
 Years at Address \_\_\_\_\_ Years in Business \_\_\_\_\_ Previous Address \_\_\_\_\_

#### PARTNERSHIP

General \_\_\_\_\_ Limited \_\_\_\_\_ Joint Venture \_\_\_\_\_ Written Agreement \_\_\_\_\_ No Agreement \_\_\_\_\_ Date Started \_\_\_\_\_  
 Partner Name \_\_\_\_\_ Birthdate \_\_\_\_\_ SS# \_\_\_\_\_ Spouse's Name \_\_\_\_\_  
 Residence Address \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_  
 Partner Name \_\_\_\_\_ Birthdate \_\_\_\_\_ SS# \_\_\_\_\_ Spouse's Name \_\_\_\_\_  
 Residence Address \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_

#### CORPORATION

Chartered in the state of \_\_\_\_\_ When \_\_\_\_\_ Registered Agent \_\_\_\_\_  
 Corporate Address \_\_\_\_\_ Officer \_\_\_\_\_  
 Residence Address \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_

#### FINANCIAL INFORMATION

Principal Assets (List all principal assets and their values.) \_\_\_\_\_  
 Principal Liabilities (List all major liabilities and their values.) \_\_\_\_\_  
 Approximate Present Net Worth of Corporation\$ \_\_\_\_\_

#### FINANCIAL INSTITUTION

Bank \_\_\_\_\_ Branch \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_  
 Account # \_\_\_\_\_ Bank Officer \_\_\_\_\_

#### TRADE CREDIT REFERENCES

Company \_\_\_\_\_ Contact \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Company \_\_\_\_\_ Contact \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Company \_\_\_\_\_ Contact \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**PERSONAL REFERENCES**

Name \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name \_\_\_\_\_ Phone(\_\_\_\_) \_\_\_\_\_ Fax(\_\_\_\_) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**TERMS & CONDITIONS**

I/We promise to pay my/our account in full within 30 days after invoice is received or as specified in terms and conditions of a separate written contract. If this account is not paid as agreed, a delinquency charge shall be computed at the rate of 1.5% per month on the unpaid balance. In the event that it becomes necessary to assign the account for collection, I/we agree to pay agency fees of one-third and/or if legal action (or appeal) is required, I/we agree to pay reasonable attorney fees and costs that are incurred. You are authorized to contact any or all of the above references regarding my/our credit standing. I/We have read the above terms and conditions and agree to abide by them.

Company Name \_\_\_\_\_ Date \_\_\_\_\_

Authorized Signature(s) \_\_\_\_\_ Title \_\_\_\_\_

Authorized Signature(s) \_\_\_\_\_ Title \_\_\_\_\_

**GENERAL PERSONAL GUARANTEE**

I/We agree to the above terms and conditions and assume personal liability for payment of this account. It is understood that credit will not be extended without this personal guarantee.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_